JFW #

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

置N RE APPLICATION OF:

James Robert Harrison et al.

Serial No.:

10/673,839

Group No.:

3752

Filed:

September 29, 2003

Examiner: Dinh Q. Nguyen

For:

IMPROVEMENTS IN WATER SPREADING IN EVAPORATIVE

COOLERS

Docket No.:

15-912D1

MAIL STOP AMENDMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for approval by examiner for this application.

STATUS

2. Applicant is

XXX a small entity

other than a small entity.

CERTIFICATE OF MAILING (37 CFR 1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: "Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450".

Patricia L. Tanner

(Type or print name of person mailing paper)

Date: August 16, 2005

(Signature of person mailing paper)

EXTENSION OF TERM

3.	The proceedings herein are for a patent application and the provisions of 37CFR 1.136 apply.													
				(complete ((a) or (b)	as appl	icable)							
	(a) Applicant petitions for an extension of time for the total number of months checked below:													
					ee for other than mall entity			Fee for small entity						
			one month two months three months four months	\$ 110 410 930 1,450	.00 .00			\$ 55.00 205.00 465.00 7250.00)					
	Fee \$													
	If an add	If an additional extension of time is required please consider this a petition therefor.												
			(che	ck and comple	te the ne	xt item,	if applicat	ole)						
			sion fortotal fee due for the						there	efor of S	\$	is deducted		
			Extension fee	lue with this re	equest		\$	-						
					OR									
	(b)	XXX	Applicant belie made to provid extension of tin	e for the possi			•				-	_		
				FEE	FOR C	LAIMS	6							
4.	The fee for claims has been calculated as shown below:					Other than a								
	(Col. 1)		(Col. 2)		(Col. 3)			Small Entity			Small Entity			
		Remaining nendment	Highest No. Previously Paid for	Preser EXTR			Rate	Addit. Fee			Rate	Addit. Fee		
TOTAL	22	MINUS	20 =	= 2	х	25 =	\$50.00		х	50 =	\$.	·		
INDEP.	3	MINUS	3 =	=	х	100 =	= \$		х	200 =	= \$			
First Presentation of Multiple Dep. Claim					х	125 =	=\$		х	250	= \$			
					To	tal	\$50.00	or	To	otal	\$			
*			Previously Paid Previously Paid		ace is le	ess than	n 20, ente	r "20".						
(c)		No addi	tional fee is req	uired										
					OR									
(d)	XX	Total ad	ditional fee req	uired \$	50.00									

FEE PAYMENT

5.	XXX	Attached is a check in the sum of	\$	50.00
		Charge Account No. 23-0630 in the sum	1 of \$_	

Fee Deficiency

6. XXX If any additional extension and/or fee is required, this is the request therefor and to charge Account No. 23-0630

And/Or

XXX If any additional fee for claims is required, charge Account No. <u>23-0630</u>.

Reg. No.: 56,480

Signature of Attorney

Tel. No.: (216) 241-6700 Fax No.: (216) 241-8151

John A. Yirga

Type or Print Name of Attorney

WATTS HOFFMANN CO., L.P.A. P.O. Box 99839 Cleveland, OH 44199-0839